

Declaration and Power of Attorney for Patent Application

Déclaration et Pouvoir pour Demande de Brevet French Language Declaration

En tant qu'inventeur ci-après désigné, je déclare par la présente que:

Mon domicile, mon adresse postale et ma nationalité sont tels que figurant ci-dessous à côté de mon nom.

Je crois être le premier inventeur original et unique (si un seul nom est mentionné ci-dessous), ou l'un des premiers co-inventeurs originaux (si plusieurs noms sont mentionnés ci-dessous) de l'objet revendiqué, pour lequel une demande de brevet a été déposée concernant l'invention intitulée

"VEHICLE TRACKING SYSTEM USING CELLULAR NETWORK",

et dont le mémoire descriptif est ci-joint à moins que la case suivante n'ait été cochée:

☒ a été déposée le _____ sous le numéro de demande des États-Unis ou le numéro de demande internationale PCT _____ et modifiée le _____ (le cas échéant).

Je déclare par la présente avoir révisé et compris le contenu du mémoire descriptif ci-dessus mentionné, incluant les revendications, telles que modifiées par toute modification ci-dessus mentionnée.

Je reconnais devoir divulguer toute information pertinente à la brevetabilité, tel que défini dans le Titre 37, §1.56 du Code fédéral des réglementations.

Je revendique par la présente la priorité étrangère, en vertu du Titre 35, §119(a)-(d) ou §365(b) du Code des États-Unis, sur toute demande étrangère de brevet ou certificat d'inventeur ou, en vertu du Titre 35, §365(a) du même Code, sur toute demande internationale PCT désignant au moins un pays autre que les États-Unis et figurant ci-dessous et, en cochant la case, j'ai aussi indiqué ci-dessous toute demande étrangère de brevet, tout certificat d'inventeur ou toute demande internationale PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

the specification of which is attached hereto unless the following box is checked:

☐ was filed on _____ as United States Application Number or PCT International Application Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations., §1.56.

I hereby claim foreign priority under Title 35, United States Code, §119(a)-(d) or §365 (b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below, and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application

French Language Declaration

ayant une date de dépôt précédant celle de la demande à propos de laquelle une priorité est revendiquée.

on which priority is claimed.

Prior foreign application(s)
Demande(s) de brevet antérieure(s)

Priority Not Claimed
Droit de priorité non revendiqué

(Number) (Country)
(Numéro) (Pays)

(Day/Month/Year Filed)
(Jour/Mois/Année de dépôt)

☐

(Number) (Country)
(Numéro) (Pays)

(Day/Month/Year Filed)
(Jour/Mois/Année de dépôt)

☐

Je revendique par la présente tout bénéfice, en vertu du Titre 35, §119(e) du Code des États-Unis, de toute demande de brevet provisoire effectuée aux États-Unis et figurant ci-dessous.

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

(Application No./ N° de demande)

(Filing Date/ Date de dépôt)

(Application No./ N° de demande)

(Filing Date/ Date de dépôt)

Je revendique par la présente tout bénéfice, en vertu du Titre 35, §120 du Code des États-Unis, de toute demande de brevet effectuée aux États-Unis, ou en vertu du Titre 35, §365(c) du même Code, de toute demande internationale PCT désignant les États-Unis et figurant ci-dessous et, dans la mesure où l'objet de chacune des revendications de cette demande de brevet n'est pas divulgué dans la demande antérieure américaine ou internationale PCT, en vertu des dispositions du premier paragraphe du Titre 35, §112 du Code des États-Unis, je reconnais devoir divulguer toute information pertinente à la brevetabilité, tel que défini dans le Titre 37, §1.56 du Code fédéral des réglementations, dont j'ai pu disposer entre la date de dépôt de la demande antérieure et la date de dépôt de la demande nationale ou internationale PCT de la présente demande:

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application No.)
(N° de demande)

(Filing Date)
(Date de dépôt)

(Status) (patented, pending, abandoned)
(Statut) (breveté, en cours d'examen, abandonné)

(Application No.)

(Filing Date)

(Status) (patented, pending, abandoned)

French Language Declaration

(N° de demande)

(Date de dépôt)

(Statut) (breveté, en cours d'examen, abandonné)

French Language Declaration

Je déclare que toutes les déclarations faites dans la présente sont à ma connaissance, véridiques et que toutes les déclarations faites à partir de renseignements ou de suppositions sont tenues pour véridiques; et de plus, que toutes ces déclarations ont été faites en sachant que toute fausse déclaration volontaire ou son équivalent est passible d'une amende ou d'une peine d'emprisonnement, ou des deux, en vertu de la Section 1001 du Titre 18 du Code des États-Unis, et que de telles déclarations volontairement fausses risquent de compromettre la validité de la demande de brevet ou du brevet délivré à partir de celle-ci.

POUVOIR: En tant qu'inventeur désigné, Je nomme par la présente l'(les) avocat(s) et/ou agent(s) inclus sous le numéro de client officiel suivant, avec plein pouvoir de révocation et de substitution, chargés de poursuivre cette demande et de traiter toute affaire s'y rapportant avec l'Office des brevets et des marques: *(mentionner le nom et le numéro d'enregistrement)*.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the agents and/or attorneys included in the following Customer Number, with full power of substitution, association, and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: *(list name and registration number)*

Please send all correspondence and direct all telephone calls to: / Veuillez adresser toute correspondance et tout appel téléphonique à:



020988

PATENT AND TRADEMARK OFFICE

Paul-André Roland SAVOIE

NAME OF FIRST INVENTOR

Signature of Inventor

Date

Residence: 501 de Gaspé

Ile des Soeurs

Quebec, CANADA H3E 1E7

Citizen of: Canadian

Post Office Address: same as above

French Language Declaration

André Eric BOULAY

NAME OF SECOND INVENTOR

Signature of Inventor

Date

Residence: 54 Daudelin Street

Kirkland

Quebec, CANADA H9J 2J6

Citizen of: Canadian

Post Office Address: same as above

PTO/SB/51 (02-01)

Approved for use through 01/31/2004. OMB 0651-0633

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

12971-IUS-IRE

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5895436, granted APRIL 20, 1999, and for which a reissue patent is sought on the invention entitled VEHICLE TRACKING SYSTEM

USING CELLULAR NETWORK
the specification of which

☒ is attached hereto.

☐ was filed on _____ as reissue application number _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

WE CLAIMED LESS THAN WE HAD THE RIGHT TO CLAIM. IN PARTICULAR, WE BELIEVE WE ARE ENTITLED TO PATENT PROTECTION ON A METHOD IN WHICH WE ARE OBTAINING LOCATING INFORMATION CONCERNING A LOCATING CELLULAR TRANSCEIVER.

NEW CLAIMS 11 THROUGH 31 CLAIM SUCH A METHOD.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

PTO/SB/51 (02-01)

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)

12971-IUS-IRE

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Name(s) Registration Number

CUSTOMER NUMBER

020988

JAMES ANGLEHART

38,796

MICHEL SOFIA

37,017

Correspondence Address: Direct all communications about the application to:

☒ Customer Number

020988

Type Customer Number here

Place Customer Number Bar
Code Label here☒ Firm or
Individual Name

SWABEY OGILVY RENAULT

Address

Address

City

State

Zip

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

PAUL-ANDRÉ ROLAND SAVOIE

Inventor's signature

Date

Residence 501 DE GASPÉ, ILE DES SOEURS

Citizenship

CANADIAN

Mailing Address

SAME

↳ QUEBEC, CANADA, H3E 1E7

Full name of second joint inventor (given name, family name)

ANDRÉ-ÉRIC BOWLAY

Inventor's signature

Date

Residence 54 DAUDELIN STREET

Citizenship

CANADIAN

Mailing Address

SAME

↳ KIRKLAND, QUEBEC, CANADA H4J 2J6

Full name of third joint inventor (given name, family name)

N/A

Inventor's signature

Date


Residence

Citizenship

Mailing Address

☐ Additional joint inventors are named on separately numbered sheets attached hereto.

P 03443 "03443" 03443

Please type a plus sign (+) inside this box → 

PTO/SB/51S (02-01)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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SUPPLEMENTAL DECLARATION FOR REISSUE PATENT APPLICATION TO CORRECT "ERRORS" STATEMENT (37 CFR 1.175)	Attorney Docket Number	12971-IUS-IRE
	First Named Inventor	ROLAND SAVOIE
	COMPLETE	
	Application Number	UNKNOWN
	Filing Date	APRIL 20, 2001
	Group Art Unit	UNKNOWN
	Examiner Name	UNKNOWN

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
PAUL-ANDRÉ ROLAND		SAVOIE	
Inventor's Signature		Date	
Name of Second Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
ANDRÉ ÉRIC		BOULAY	
Inventor's Signature		Date	
Name of Third Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
N/A			
Inventor's Signature		Date	
Name of Fourth Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
N/A			
Inventor's Signature		Date	

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

(Page 1 of 1)

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PTO/SB/52 (02-01)

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REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (optional) 12971-US-1RE
I hereby declare that:		
My residence and mailing address and citizenship are stated below next to my name.		
I am authorized to act on behalf of the following assignee: RANKIN RESEARCH CORPORATION		
and the title of my position with said assignee is: PRESIDENT		
The entire title to the patent identified below is vested in said assignee.		
Name of Patentee(s): PAUL-ANDRÉ ROLAND SAUOIE AND ANRÉ-ERIC BOULAY		
Patent Number 5895 436	Date of Patent Issued APRIL 20, 1999	
Title of Invention VEHICLE TRACKING SYSTEM USING CELLULAR NETWORK		
I believe said patentee(s) to be the original, first and sole/joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled VEHICLE TRACKING SYSTEM USING CELLULAR NETWORK		
the specification of which		
<input checked="" type="checkbox"/> is attached hereto.		
<input type="checkbox"/> was filed on _____ as reissue application number _____ / _____ and was amended on _____ (if applicable)		
I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.		
I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)		
<input type="checkbox"/> by reason of a defective specification or drawing.		
<input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.		
<input type="checkbox"/> by reason of other errors.		
At least one error upon which reissue is based is described as follows: WE ARE ENTITLED TO PATENT PROTECTION ON A METHOD IN WHICH WE ARE OBTAINING LOCATING INFORMATION CONCERNING A LOCATING CELLULAR TRANSCEIVER. [Attach additional sheets, if needed.]		
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.		

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

PTO/SB/52 (02-01)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (Optional) 12971-US-IRE	
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.			
Name(s) JAMES ANGLEHART		Registration Number 38796	
MICHEL SOFIA		37017	
CUSTOMER NUMBER		020988	
Correspondence Address: Direct all communications about the application to:			
<input checked="" type="checkbox"/> Customer Number		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 020988 </div> <div style="display: inline-block; vertical-align: middle;">→</div> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> Place Customer Number Bar Code Label Here </div>	
OR			
<input checked="" type="checkbox"/> Firm or Individual Name		SWABEY OGILVY RENAULT	
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of person signing (given name, family name) ANDRÉ-ÉRIC BOULAY			
Signature		Date	
Address of Assignee 9280 L'ACADIE BLVD, MONTREAL, QUEBEC, H4N 3C5 CANADA			
Patentee PAUL-ANDRÉ ROLAND SAVOIE		Citizenship CANADIAN	
Residence/Mailing Address 501 DE GASPE, ÎLE DES SOEURS, QUEBEC, CANADA, H3E 1E7			
Patentee ANDRÉ-ÉRIC BOULAY		Citizenship CANADIAN	
Residence/Mailing Address 54 DAUDELIN ST, KIRKLAND, QUEBEC, CANADA, H9J 2J6			
<input type="checkbox"/> Additional Patentees are named on separately numbered sheets attached hereto.			

PTO/SB/53 (02-01)

Approved for use through 01/31/2004, OMB 0651-0033

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REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT		Docket Number (Optional) 12971-1US-1RE
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) PAUL ANDRE ROLAND SAWIE AND ANDRE ERIC BOULAY		
Patent Number 5895436	Date Patent Issued APRIL 20, 1999	
Title of Invention VEHICLE TRACKING SYSTEM USING CELLULAR NETWORK		
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
The assignee(s) owning an undivided interest in said original patent is/are RANKIN RESEARCH CORPORATION and the assignee(s) consents to the accompanying application for reissue.		
Name of assignee/inventor (if not assigned) RANKIN RESEARCH CORPORATION		
Signature	Date	
Typed or printed name and title of person signing for assignee (if assigned) ANDRE-ERIC BOULAY, PRESIDENT		

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231